

PURPOSE

To assure consistency regarding rules, controls and monitoring of access control across the Michigan Department of Health and Human Services (MDHHS) hospitals.

DEFINITIONS**Access Control**

Building control measures that are associated with lock and key hardware or proxy card access. The definition of access control includes keys and locks associated with access to the physical plant, its patient units, hospital staff offices, pharmacy, etcetera. This definition does not include keys and locks not associated with building control measures such as desks, file cabinets, or state vehicles.

Hospital

An inpatient program operated by the department for the treatment of individuals with serious mental or serious emotional disturbance.

Hospital Sponsor

An individual directly employed by the hospital who is ultimately responsible for the access control of a hospital contractor or vendor.

POLICY

Hospitals are committed to maintaining the highest standards of safety and security. Hospital administration, clinical staff, direct care staff, and staff with infrequent patient contact are equally responsible in maintaining access control.

STANDARDS

Hospital administration shall develop procedure(s) necessary to ensure that access control is documented and managed in such a way that maintains the safety and security of the hospital, its patients, and its staff.

This policy does not apply to the Office of Human Resources (HR) or Office of Recipient Rights (ORR) whose staff are within the confines of the hospital's physical plant. Hospital administration, or their designee, shall provide access control within a reasonable time frame when requested by HR or ORR management or staff.

Hospital staff, including hospital administration, shall not be provided access control rights to HR or ORR offices. Access control privileges may be provided to hospital facilities management staff in coordination with HR or ORR management when building maintenance is required.

Staff Access

Hospital administration shall develop procedures to ensure that:

- Access control is granted to hospital employees and non-intermittent contracted staff who have a legitimate need for such access.
- Access control is requested via written documentation from the employee's immediate supervisor with an explanation as to why such access is necessary.
- Access control is granted via written authorization of the requested access by hospital administration or, should hospital procedures reflect, facilities management or the hospital security department.
- Hospital facilities management or hospital security staff are responsible for granting access control with written authorization of hospital administration. Such issuance should be facilitated in coordination with the employee's immediate supervisor.
- Hospital facilities management or hospital security staff are responsible for a centralized system(s) of control, which includes inventory listings and management of access control. Inventory listing(s) must include all made keys, assigned and unassigned keys, and broken and missing keys of all hospital employees and non-intermittent contracted staff. Inventory listing(s) must be retained and updated for a period of not less than seven years.
- Hospital facilities management or hospital security staff are responsible for storing unassigned keys in a locked cabinet or container in a secured area.
- Keys shall not be stored or left unattended in any unsecured areas.

- Hospital employees and non-intermittent contracted hospital staff with like job duties and assignments will be provided consistent access control.
- Access control to the hospital pharmacy is strictly regulated.
- All issued instruments necessary for access control are the property of the issuing hospital.
- The passing or loaning of instruments necessary for access control is prohibited.
- Except for hospital facilities management or hospital security staff, the duplication or altering of any key or key ring is prohibited.
- Hospital facilities management or hospital security staff are involved in the key and electronic access card return process if hospital staff separates from employment.

Vendor Access

Hospital administration shall develop procedures to ensure that non-clinical vendors (such as maintenance contractors) who require access to the physical plant on an intermittent basis be granted such when necessary and appropriate:

- Vendors shall only be granted access control on a restrictive basis.
- Vendors must obtain a hospital sponsor which must request written access on behalf of the vendor.
- Vendor access control is granted via written authorization of the requested access by hospital administration or, should hospital procedures reflect, facilities management or the hospital security department.
- It is the responsibility of a vendor's hospital sponsor to ensure that the minimum degree of access control necessary to complete the necessary task is provided. Access control instruments must be obtained and returned by the vendor daily or after a period of time if approved by hospital administration or, should hospital procedures reflect, facilities management or the hospital security department.

**Lost, Stolen or
Unreturned Keys**

Unless otherwise specified, hospital administration shall develop procedures to ensure that:

- Lost or stolen access control instruments are reported immediately to the employee's immediate supervisor and to facilities management and the hospital security department.
- All inventory listings are immediately updated to reflect the loss of the instruments necessary for access control.
- Hospitals may be reimbursed, via employee payroll deduction, a standard per key amount (as defined by the bureau of hospitals and administrative operations) for keys that have been lost or stolen, or not returned as a result of employee separation.

Audits

Hospital administration shall develop procedures to ensure that:

- Audits of hospital staff key assignment are completed by hospital administration not less than annually to ensure access control integrity.
- Annual audits sample at least 33 percent of the hospital's keyholders.
- Copies of such key assignment audits must be retained by hospital administration for a period of not less than seven years.

CONTACT

For more information concerning this policy contact the the Bureau of Hospitals and Administrative Operations at 517-241-3131.